

| POSITION                  | INITIALS     | ID NO.     | DATE            |
|---------------------------|--------------|------------|-----------------|
| FEE DETERMINATION         | <i>mesay</i> |            | <i>09-06-01</i> |
| O.I.P.E. CLASSIFIER       |              | <i>10</i>  | <i>9-12-01</i>  |
| FORMALITY REVIEW          | <i>MTB</i>   | <i>954</i> | <i>10/3/01</i>  |
| RESPONSE FORMALITY REVIEW |              |            |                 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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10-03-01